PATENT APPLICATION FEE DETERMINATION RECOR								, ,			or Docket Number		
Effective October 1, 2001								209355050					
		CLAIMS AS	S FILED - (Column			(Column 2)		SMALL ENTITY TYPE		MIY	: OR	OTHER THAN	
TOTAL CLAIMS			14					PATE		FEE	\$1 KZ-11	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	BAS		FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/4 minus 20=		*	ß	X\$		=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus3 =		* (1	X42		=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT] +14				OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL			QR	TOTAL	740
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMAI	LL E	NTITY	OR	OTHER SMALL I	THAN
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT	NUI PREV		HEST HBER PRESENT OUSLY EXTRA			RATI	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 19	Minus	* Z	\mathcal{D}	2		X\$ 9	=		OR	X\$18=	
	Independent	• .Z	Minus	SENDEND	S CLAIM			X42:			OR	X84=	
لبا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	=		OR	+280=	
				•	•		•	TOT. ADDIT. F			OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)					_		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total		Minus	**	all the	-	1	X\$ 9	<u> </u>		OR	X\$18=	
	independent	*	Minus	***		=		X42=	-		OR	X84=	

(Column 2)

HIGHEST

NUMBER

PREVIOUSLY

PAID FOR

***If the "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3."

Th "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

(Column 3)

PRESENT

EXTRA

(Column 1)

CLAIMS

REMAINING

AFTER

AMENDMENT

AMENDMENT C

Total

Independent

FORM PTO-875 (Rev 8/01)

Minus

Minus

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

ADDI-

TIONAL

FEE

+280=

ADDIT. FEE

RATE

X\$1B=

X84=

+280=

ADDIT. FEE

TOTAL

TOTAL

OR

OR

OR

OR

OR

ADDI-

TIONAL

FEE

+140=

ADDIT. FEE

RATE

X\$ 9=

X42≃

+140=

ADDIT, FEE

TOTAL

TOTAL